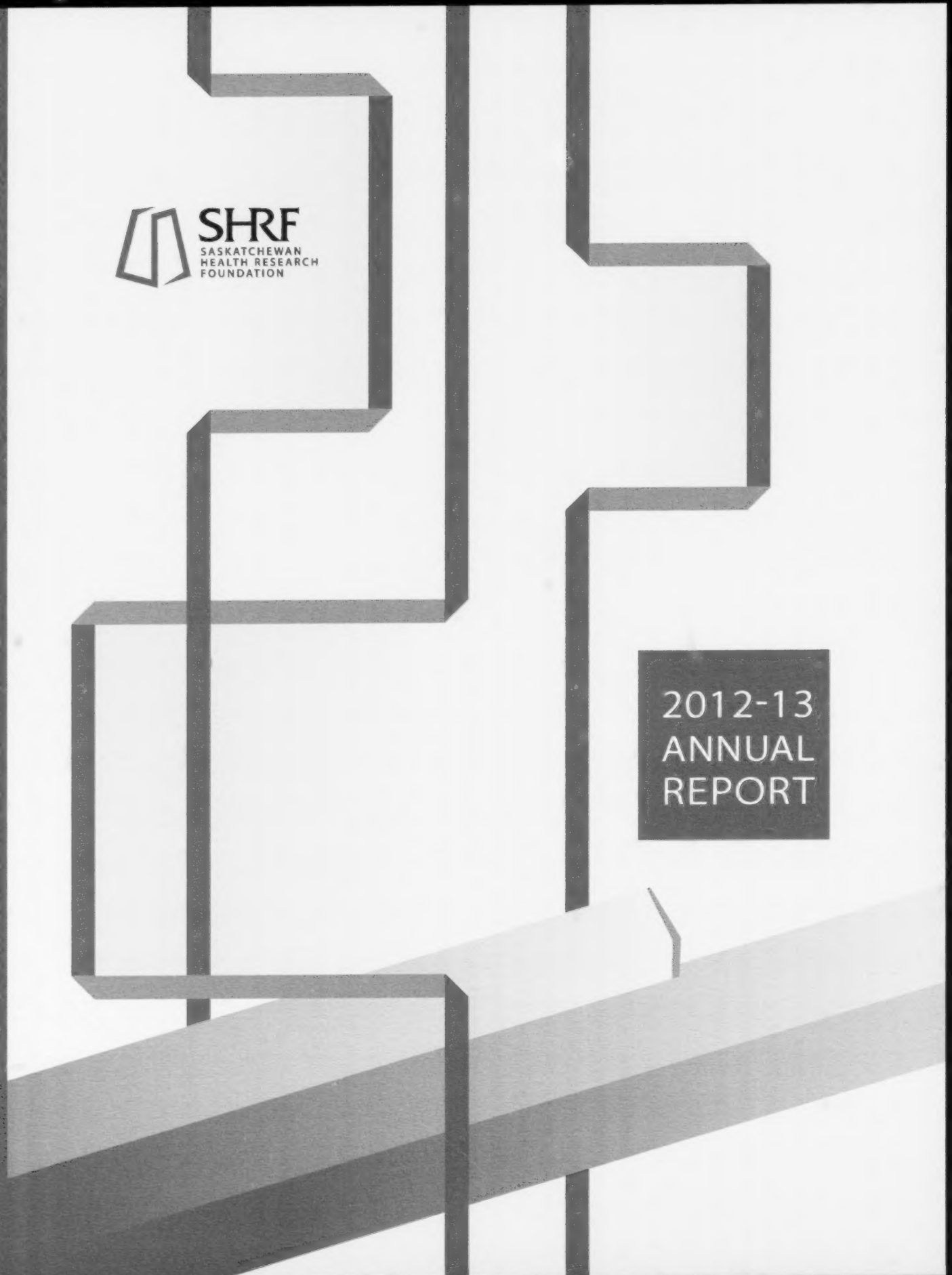

SHRF
SASKATCHEWAN
HEALTH RESEARCH
FOUNDATION
2012-13
ANNUAL
REPORT

SHRF
SASKATCHEWAN
HEALTH RESEARCH
FOUNDATION

Vision

Building a healthy Saskatchewan through health research

Mission

The Saskatchewan Health Research Foundation contributes to a healthy province by funding and promoting excellence in health research, promoting the benefits of health research, and enhancing capacity, including securing funds to support excellent research and researchers.

Values

We believe health research:

- is the ethical search for truth, knowledge, and understanding about human health;
- is an investment that leads to benefits for all Saskatchewan residents in many areas including health, education and the economy;
- includes both basic and applied research; and
- encompasses many dimensions including biomedical science, clinical investigation, health services and systems research, and research into the determinants of population health.

We are committed to good governance, including:

- good stewardship for the resources entrusted to us; and
- the highest standards of public accountability.

We will maintain the highest standards of professional conduct, including:

- integrity and honesty;
- respect for diverse perspectives and approaches; and
- clear, open, honest, and timely communication.

We will work co-operatively and collaboratively with others to:

- achieve mutual goals related to advancing health research in Saskatchewan; and
- ensure research findings are shared and used as widely as possible.

We strive for excellence and innovation in all our endeavours.

Saskatchewan Health Research Foundation

June M. Bold, Chief Executive Officer

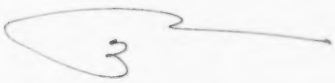
Rodney Antonichuk, Director of Partnerships
Shaz Azam, Director of Finance
Irene Blum, Accountant
Karen Glazebrook, Funding Programs Manager
Lynn Nastiuk, Executive Assistant to the CEO
Patrick Odnokon, Director of Impact and Evaluation
Trina Richman-Monar, Facilitator, Special Initiatives
Pamela Riffel, Administrative Assistant, Information Systems
Tanya Skorobohach, Administrative Assistant, Funding Programs

Letter of Transmittal

The Honourable Dustin Duncan
Minister of Health
Legislative Assembly
Regina, SK S4S 0B3

I am pleased to submit for your consideration the annual report of the Saskatchewan Health Research Foundation for the fiscal period April 1, 2012 to March 31, 2013.

Respectfully submitted,



Terry Baker
Board Chair

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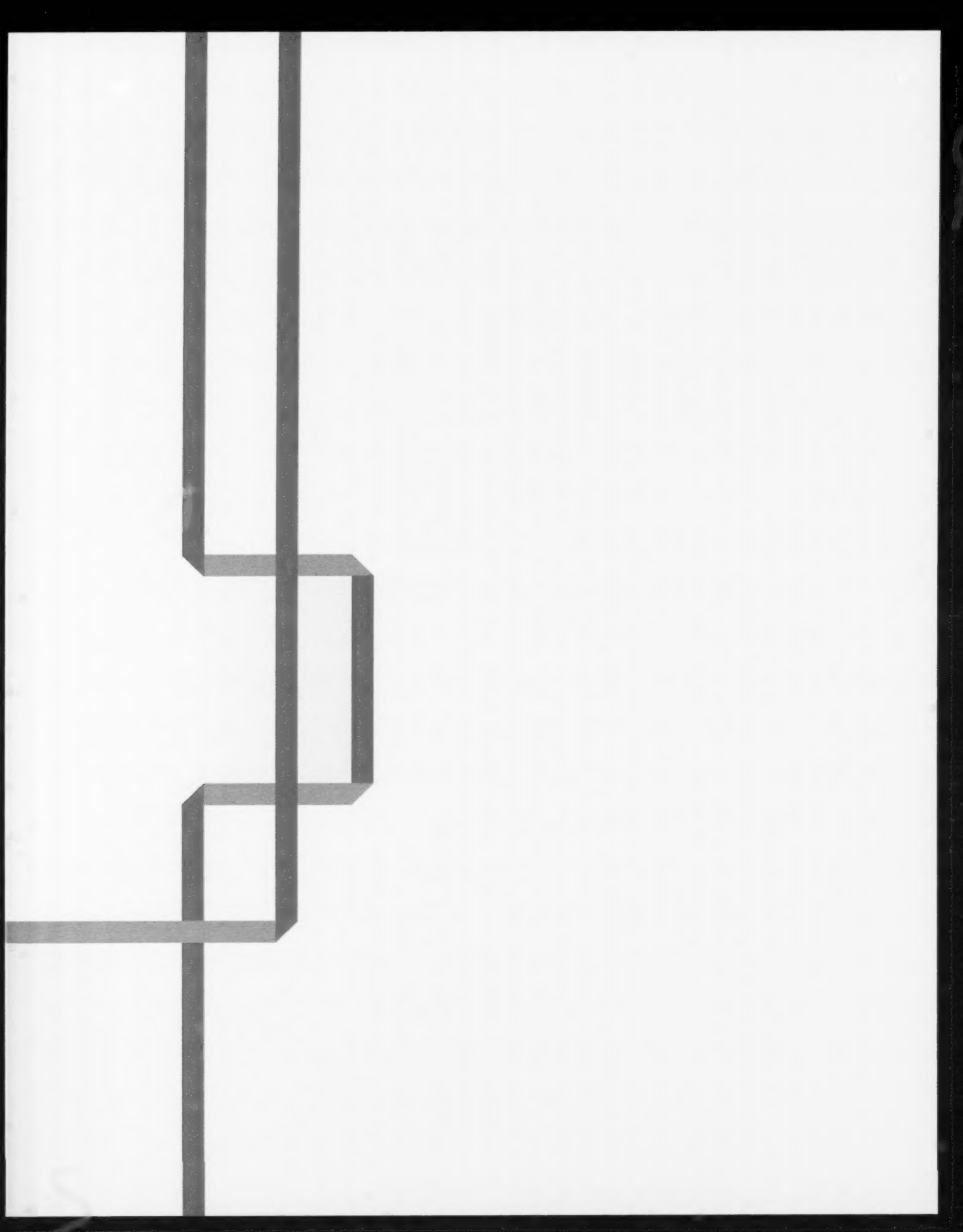


Letter from the Board Chair

In 2012-13, SHRF achieved a milestone – a decade of growth. Over the years, we've demonstrated we play a lead role in facilitating a co-operative and collaborative environment that enhances health research enterprise and innovation. We have also shown that health research has value and impact to the people of Saskatchewan.

The work SHRF does every day helps pave the road to innovation, supplying resources that researchers and institutions need to fulfill the vision of a healthier society. SHRF provides trusted support, while championing strong science and valued impact. The Government of Saskatchewan continues to support our budget for health research, but the provincial health research enterprise faces a number of opportunities and challenges.

Saskatchewan has turned an economic corner. With a "booming" economy come other pressures – pressures on population, housing, growth, and healthcare needs. All of these components of a growing provincial economy compete for a finite amount of budget resources. SHRF remains acutely aware of the impact and outcomes that health research can play in supporting the population of Saskatchewan and continues to raise the importance of funding health research among its many stakeholders. Clearly healthy individuals, healthy families, and healthy communities are at the core of everyone's vision of health research.

On behalf of the Board, I'd like to thank the staff of SHRF for their efforts in continually working towards this goal. I would also like to thank departing board members Heather George, John Gordon, Lori Hutchison Hunter and Jacqueline Messer-Lepage for their thoughtful and insightful contributions. I also welcome new board members William Albritton, Brent Brownlee, David Katz, Kathleen Peterson, and Don Somers, and look forward to the guiding discussions we have yet to share.

After 10 years, the goal remains the same - improving our health system and economy, and generating benefits for our people. There are many more years of health research activity and success to come.

Terry Baker
Board Chair

Letter from the CEO

In 2003, if I had been asked what I would like to achieve in the next 10 years as CEO of SHRF, I may have used words like trust, strength, and impact. From my perspective today, 10 years later, we have delivered and continue to deliver all three. SHRF provides trusted support to Saskatchewan's health research enterprise. This includes programs that attract researchers and build capacity, strong granting mechanisms that support quality and excellence, and an emphasis on knowledge sharing and measuring the impact that health research has had on the health of Saskatchewan people.

This year we've taken a different approach to our annual report, focusing more on our strategic plan and our accountability to that plan. It describes progress on goals and objectives laid out in the SHRF Strategic Plan 2011-2015. This new format will be complemented by another publication – a new yearbook that tells the stories of health research.

Our work requires strong collaboration among the many stakeholders and constituents. The following three examples highlight the level of co-operation and support that have helped SHRF make progress on its strategic goals.

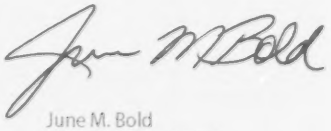
Two new research chairs were announced last year. One resulted from SHRF partnering with the Heart and Stroke Foundation of Canada and the U of S. Saskatoon brain surgeon and medical researcher Dr. Michael Kelly was awarded the Saskatchewan Research Chair in Clinical Stroke Research and Interprofessional Health Education to pursue innovative methods in the operating room and synchrotron-based studies at the Canadian Light Source. His mission is to advance understanding of strokes and improve their prevention and treatment. SHRF also played a key role in the partnership that attracted Dr. Thomas Rotter from the Netherlands to the U of S as the first Chair in Health Quality Improvement Science. The chair award is co-funded by the U of S, Saskatchewan's Ministry of Health, and the Health Quality Council; SHRF is administering the funds per its usual standards.

In 2012, two special advisory panels concluded their work and provided key insights into two priority areas. Aboriginal Peoples' health has been a high research priority for SHRF. We've protected funding for this research and over the past five years, have invested over $2.4 million in the area. SHRF convened this panel to help us develop a strategy for enhancing Aboriginal Peoples' health research in Saskatchewan. The second panel focused on health services and policy research to accelerate and promote this critical area because of its potential to provide evidence for system and policy changes. The recommendations received from both panels will help shape our work in these areas and we appreciate the thoughtful input we received and the time invested by panel members.

Considerable time and energy went into a new study on research impact called "Measuring the Value of Saskatchewan's Health Research." The study is the culmination of several years of effort that began with SHRF working with other health research funding agencies and the Canadian Academy of Health Sciences to design a method to assess the impact and value of research and its wide-ranging outcomes and benefits. The report will be released early in the new fiscal year and we look forward to sharing the findings with our partners and other stakeholders within Saskatchewan and across the country.

These three examples set the stage for the development of a new provincial Health Research Strategy, an undertaking that will begin in mid-2013. As with the original strategy, we will use a wide consultation process to gather a broad range of input. We will ask about what aspects of the current Strategy need to continue and what new directions or strategies need to be considered in a renewed Strategy. We will begin by seeking input from our key stakeholder, the Government of Saskatchewan, and will proceed to have strategic conversations with representatives from various institutions in the post-secondary and health sectors, with our partners in the charitable world, and with private sector leaders.

In conclusion, I would like to thank everyone – researchers, collaborators, board, and staff – who have contributed to SHRF's progress over the past 10 years in providing trusted support, while investing in strong science that has a valued impact for our province. I look forward to a strong future for health research in Saskatchewan.



June M. Bold
Chief Executive Officer

Agency Overview

With SHRF's vision of "building a healthy Saskatchewan through health research" comes great responsibility; it requires the commitment and collaboration of many partners. There is an entire province of people who have entrusted SHRF with their investment, and who ultimately benefit from the outcomes and transfer of knowledge that results from health research.

As a publicly funded agency, SHRF has developed a governance model that ensures transparency and accountability in all of its activities. In addition, the grants SHRF makes are subject to rigourous peer review by health research experts to ensure expected standards of health research are maintained.

Mandate

As defined in *The Saskatchewan Health Research Foundation Act (2002)*, SHRF's mandate is comprised of the following elements:

1) Seek and receive funding from government and non-government sources for the advancement of research.

2) Encourage and facilitate research in health sciences; the health-related social sciences and other health-related fields of study.

3) Assist the Minister of Health to develop a provincial strategy for research into matters associated with the health sciences, the health-related social sciences, and other health-related fields of study.

4) Provide funding to persons and agencies who are conducting or proposing to conduct research projects that are consistent with the provincial strategy.

5) Disseminate information to members of health-related professions and to the public respecting the objects of the Foundation, the research that the Foundation supports, the results of that research, and conclusions drawn from that research.

Governance

Board of Directors

A Board of Directors guides the activities of SHRF. Membership can be drawn from the health research community, government, health delivery system, business, and public at large.

A Governance Framework and Policies document sets out the Board's governance philosophy, its processes, and policies for managing the affairs and business of SHRF.

Membership consists of not more than 12 members who are appointed by the Lieutenant Governor in Council and who hold office for a term not exceeding three years, renewable once. Each board member also serves on a board committee. Currently, SHRF has two standing committees: Governance; and Finance and Audit.

In 2012-13, a total of four board meetings were held. Figures in brackets indicate the number of meetings each board member attended.

Terry Baker (4)
(Chair)
Private business, Farming

Don Somers (2)
(Vice Chair as of March 27, 2013, Director from August 17, 2012)
Private business, Consulting

Lori Hutchison Hunter (0)
(Vice Chair from August 17, 2012 to March 27, 2013)
Saskatchewan Ministry of Health

Jacqueline Messer-Lepage (2)
(Vice Chair until August 17, 2012)
Saskatchewan Ministry of Health

Sylvia Abonyi (3)
University of Saskatchewan

William Albritton (2)
(from August 17, 2012)
University of Saskatchewan

Brent Brownlee (0)
(from March 27, 2013)
Saskatchewan Ministry of Advanced Education

Heather George (3)
(until March 27, 2013)
Saskatchewan Ministry of Advanced Education

John Gordon (2)
(until August 17, 2012)
University of Saskatchewan

Andrew Greenshaw (3)
University of Alberta

Beth Horsburgh (3)
University of Saskatchewan
Saskatoon Health Region

Shanthi Johnson (3)
University of Regina

David Katz (2)
(from August 17, 2012)
Innovation Saskatchewan

Gordon McKay (4)
University of Saskatchewan

Kathleen Peterson (0)
(from March 27, 2013)
Saskatchewan Ministry of Health

Tom Porter (4)
Private business, Consulting

Peer Review

Grant selection processes are founded on expert peer review, where panels of active researchers and health professionals assess research proposals using excellence, relevance, and feasibility as key deciding factors. Applications must also exemplify the stated objectives and priorities for the particular funding program as described in our annual awards guide.

Our reviewers are not only instrumental in evaluating applications; they also provide valuable feedback to us about procedures, programs, and trends in the health research community.

Our granting process has multiple steps. Peer review for programs where SHRF is matching or partnering with other funding agencies may be done by the other agency, so long as SHRF requirements are met.

Selection Steps

1. SHRF invites reviewers to serve on committees
2. Applicants submit applications to SHRF
3. SHRF staff screen applications for completeness and eligibility
4. Review committee chair, with SHRF staff, assigns applications to reviewers
5. Reviewers prepare in-depth assessments based on program criteria and excellence
6. Committee meets to discuss, rate and rank all applications
7. Committee recommends meritorious applications for funding
8. SHRF Board reviews the committees' recommendations and approves funding
9. SHRF offers grants and awards to as many recommended applicants as resources permit
10. SHRF staff ensure all conditions are met before authorizing payments to researchers' home institutions

Committee Membership 2012-13

In 2012-13 the following peer reviewers provided their expertise on a volunteer basis. Committee membership is typically for a three-year term. In addition, for each establishment grant application, SHRF asks two experts from outside Saskatchewan to provide reviews and wishes to thank the many scientists and health professionals from across Canada and elsewhere who have contributed to our adjudication process.

BIOMEDICAL PERSONNEL AWARDS REVIEW COMMITTEE

Darrell Mousseau (Chair) (2)
Department of Psychiatry
College of Medicine
University of Saskatchewan

Terra Arnason (2)
Department of Medicine
College of Medicine
University of Saskatchewan

Ildiko Badea (1)
College of Pharmacy and Nutrition
University of Saskatchewan

Oleg Dmitriev (2)
Department of Biochemistry
College of Medicine
University of Saskatchewan

Sean Mulligan (3)
Department of Physiology
College of Medicine
University of Saskatchewan

Dae-Yeon Suh (1)
Department of Chemistry and Biochemistry
Faculty of Science
University of Regina

Lynn Weber (3)
Department of Veterinary Biomedical Sciences
Western College of Veterinary Medicine
University of Saskatchewan

Joyce Wilson (2)
Department of Microbiology and Immunology
College of Medicine
University of Saskatchewan

Yan Zhou (3)
Vaccine and Infectious Disease Organization
University of Saskatchewan

BIOMEDICAL ESTABLISHMENT GRANT REVIEW COMMITTEE

Patrick Krone (Chair) (3)
Department of Anatomy and Cell Biology
College of Medicine
University of Saskatchewan

Veronica Campanucci (1)
Department of Physiology
College of Medicine
University of Saskatchewan

Tanya Dahms (1)
Department of Chemistry and Biochemistry
Faculty of Science
University of Regina

Peter Howard (2)
Department of Microbiology and Immunology
College of Medicine
University of Saskatchewan

Wolfgang Koester (3)
Vaccine and Infectious Disease Organization
University of Saskatchewan

Edward Krol (2)
College of Pharmacy and Nutrition
University of Saskatchewan

David Palmer (3)
Department of Chemistry
College of Arts and Science
University of Saskatchewan

Cheryl Waldner (3)
Department of Large Animal Clinical Sciences
Western College of Veterinary Medicine
University of Saskatchewan

SOCIO-HEALTH, SYSTEMS, AND CLINICAL REVIEW COMMITTEE

Mary Hampton (Chair) (3)
Department of Psychology
Luther College
University of Regina

Angela Bowen (2)
College of Nursing
University of Saskatchewan

Alexander Clark (3)
Faculty of Nursing
University of Alberta

Vanina Dal Bello-Haas (3)
School of Rehabilitation Science
McMaster University

Roy Dobson (1)
College of Pharmacy and Nutrition
University of Saskatchewan

Rachel Engler-Stringer (1)
Department of Community Health and Epidemiology
College of Medicine
University of Saskatchewan

Jonathan Farthing (2)
College of Kinesiology
University of Saskatchewan

Donna Goodridge (3)
College of Nursing
University of Saskatchewan

Paul Hackett (2)
Department of Geography
College of Arts and Science
University of Saskatchewan

Michael MacGregor (1)
Department of Psychology
College of Arts and Science
University of Saskatchewan

Stephen Whitehead (1)
Department of Community Health and Epidemiology
College of Medicine
University of Saskatchewan

COLLABORATIVE GRANTS AND AWARDS REVIEW COMMITTEE

Tom Wishart (Chair) (4)
Department of Psychology
College of Arts and Science
University of Saskatchewan

Ivy Lynn Bourgeault (1)
Interdisciplinary School of Health Sciences
Faculty of Health Sciences
University of Ottawa

Heather Hadjistavropoulos (3)
Department of Psychology
Faculty of Arts
University of Regina

Tom Hobman (1)
Department of Cell Biology
Faculty of Medicine and Dentistry
University of Alberta

Barbara Shay (1)
Department of Physical Therapy
School of Medical Rehabilitation
University of Manitoba

ACHIEVEMENT AWARD REVIEW PANEL

John Challis (2)
BC Centre for Disease Control

Sonya Corkum (1)
SCI Action Canada

James Dosman (1)
Canadian Centre for Health and Safety in Agriculture
College of Medicine
University of Saskatchewan

Figures in parentheses indicate number of years served, including current year.

Alignment to Government's Direction

The Saskatchewan Plan for Growth, released in 2012, set out the Government of Saskatchewan's vision for a province of 1.2 million people by 2020. The plan identified principles, goals and actions to ensure Saskatchewan is capturing the opportunities and meeting the challenges of a growing province. While the role of health research is not specifically referenced, a number of key purposes and principles do have a direct correlation to the work and activity of SHRF, in particular "the purpose of growth is to secure a better quality of life for all Saskatchewan people."

Clearly, quality of life requires a foundation of good health. Healthy families, healthy individuals, and healthy communities require the continuous knowledge and innovation that results from on ongoing commitment to health research support and a strong health research enterprise. In return, growth provides the means for continuous investment and commitment to research and innovation.

SHRF connects to the province's growth plan by ensuring its mandate is translated into a Strategic Plan which builds upon the priorities for health research that are delineated in Saskatchewan's *Health Research Strategy*.

Strategic Plan

SHRF's main performance goal is to "grow Saskatchewan's health research enterprise through increased dollars invested in Saskatchewan from all potential funders of health research." The Plan is structured around the following four strategic goals and accompanying actions:

1. Focusing on research priorities that reflect needs and strengths;
2. Supporting the research environment;
3. Encouraging the sharing and using of health research; and
4. Achieving excellence.

In addition, the plan incorporates three crosscutting business strategies that will shape SHRF's work for years to come:

- Build partnerships with public and private sector organizations to increase resources for health research (trusted support);
- Lead and co-ordinate strategic health research opportunities for the province (strong science); and
- Facilitate linkages that support better connections across research, innovation, and practice (valued impact).

This year's Annual Report tracks our progress through the strategic goals of our strategic plan.

1 FOCUSING ON RESEARCH PRIORITIES

SHRF USES ITS ASSETS AND RESOURCES TO FOCUS ON AREAS OF NEED WHILE CAPITALIZING ON AREAS OF STRENGTH.

OBJECTIVE: **Targeted actions that advance provincial research priorities**

Achievements in 2012-13

To continuously connect with and adapt to the needs of Saskatchewan people and the health research community, SHRF remained committed to engaging key stakeholders to accept input and guidance on its activities. This year, SHRF convened two advisory panels, one focused on Aboriginal Peoples' health research and a second looking at health services research.

The Aboriginal Health Research Advisory Panel held two workshops and a third follow-up meeting over the summer and fall of 2012. The group identified priorities for Aboriginal Peoples' health research in Saskatchewan and discussed funding mechanisms and strategies to move these priorities forward.

To build on the strengths within the health services system in Saskatchewan and to accelerate and promote health services research, the Health Services Research Panel met twice in 2012. The panel identified priorities for health services research in Saskatchewan, recommended potential funding mechanisms, and suggested other strategies to promote health services research.

The recommendations received from both panels are available on the SHRF website.

Saskatchewan's *Health Research Strategy* has five priorities: health needs of specific populations (Aboriginal People and seniors); health systems and policy research; determinants of health status; public health including infectious disease, water and food safety; and synchrotron-based health research.

As part of SHRF's regular granting process all applicants are asked to list which priorities their research proposal falls within.

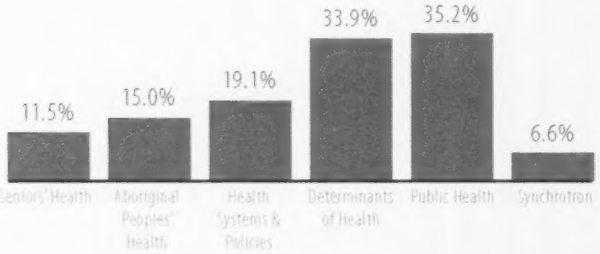
Determinants of health and public health continue to attract the most interest for health research in Saskatchewan (see graph 1).

Planned Actions 2013-14

Acting on a recommendation from the Aboriginal Health Research Advisory Panel SHRF will facilitate with partners, a community engagement training workshop. The workshop will help inform researchers about strategies, processes, and methods for effective community engagement, particularly with Aboriginal communities. The day will include an overview of ethics requirements, as defined in Chapter 9, "Research Involving the First Nations, Inuit and Métis Peoples of Canada," of the TCPS 2 (Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans, 2nd edition).

The 10-year term of the provincial Health Research Strategy will end in March 2014. As the lead agency on the Strategy, SHRF will be undertaking consultations to update the strategy including: a review of its themes and priorities; and a consideration of new developments and emerging needs.

GRAPH 1: PER CENT OF RESEARCHERS WORKING IN EACH PROVINCIAL PRIORITY AREA



SOURCE: Health Research Capacity in Saskatchewan: A Descriptive Report 2nd Edition. Saskatchewan Health Research Foundation, 2012

N = 360

OBJECTIVE: Increased funding to provincial research priorities

Achievements in 2012-13

The board approved $4.1 million for new research grants and fellowships.

SHRF continued to protect and allocate funding for health research priority areas - a minimum of 50% in fellowships and establishment grants and 100% in groups and chairs.

SHRF board-approved grants plus additional matching funds and partner invested funds are listed below for each of the Health Research Strategy's priority areas (Note: researchers can be working in more than one priority area, which means these totals will be different from the annual board approved amount of $4.1 million):

- health needs of specific populations (Aboriginal Peoples' health and seniors' health): $2,631,377
- health systems and policy research: $1,274,945
- determinants of health status: $2,281,347
- public health including water and food safety: $ 988,427
- Synchrotron-based health research: $870,000

With our partners, SHRF had great success attracting leading researchers:

- SHRF played a key role in the recruitment process that attracted Dr. Thomas Rotter to the U of S as the first Chair in Health Quality Improvement Science and Interprofessional Health Education. Supported by the U of S, the Saskatchewan Ministry of Health, and the Health Quality Council, Dr. Rotter will address different dimensions of health quality including safety, patient-centred care, timeliness, effectiveness, and clinical care pathways;
- SHRF partnered with the Terry Fox Research Institute (TFRI) to announce Dr. Ayman Mohammad, now at the U of S's College of Pharmacy and Nutrition, as the first recipient of the Terry Fox Postdoctoral Fellowship. Co-funded by SHRF and TFRI, the award provides $50,000 a year for two years to support research that increases our understanding of cancer, from early detection to diagnosis, treatment, and potential cure. This partnered fellowship brings a top-notch new scientist to Saskatchewan, adding capacity to tackle the cancer challenge; and
- The Saskatchewan Research Chair in Clinical Stroke Research awarded to Dr. Michael Kelly and announced in 2012, was the culmination of an agreement signed between SHRF and the Heart and Stroke Foundation of Canada (HSF) in 2010. The U of S undertook recruitment for this $1 million chair that will focus on finding better preventions and treatments for stroke, a leading cause of death and disability for Saskatchewan people. SHRF and HSF will each contribute $100,000 per year for the next five years to fund the position.

The Partnerships for Health System Improvement (PHSI) Program is Canada's premier health services and policy research competition with a strong emphasis on partnerships and knowledge translation. This Canadian Institutes of Health Research(CIHR) partnership initiative supports teams of researchers and decision-makers conducting applied health services research useful to health system managers and or policy makers within the next five years. SHRF provides the required matching funds, subject to resource availability and fit with provincial priority areas. In 2012-13, one grant was supported and SHRF's portion of the funding was $68,252 (see Table 1).

Planned Actions 2013-14

Core programs will be maintained at current levels for the next few years; however, considerable growth in demand has been experienced for our programs in recent years. With funding envelopes unchanged, many well-rated applications will not be funded because we cannot afford to do so.

SHRF and the Board will be working to ensure sustained funding is available to support health research programs, both core programs and matching federal programs. SHRF will identify funding priorities in consultation with stakeholders and partners.

The Saskatchewan Research Chair is MS Clinical Research may be awarded in 2013-14 in partnership with Saskatoon City Hospital Foundation; this would be a $1M investment over five years, shared 50:50 with our partner.

We expect to provide one PHSI grant in 2013-14.

2 SUPPORTING THE RESEARCH ENVIRONMENT

SHRF USES ITS ASSETS AND RESOURCES TO DEVELOP STRONGER OVERALL HEALTH RESEARCH CAPACITY IN SASKATCHEWAN.

OBJECTIVE: With partners, explore SHRF's fund development mandate

Achievements in 2012-13

SHRF sought and facilitated discussions related to advancing its fund development mandate. During the year, SHRF provided information and gathered input into this area from government, university, and other sector partners in order to create an appropriate fund development logic model as a framework for a feasibility study. SHRF then retained the services of a consultant to conduct a feasibility study that explored acceptance of the fund development logic model and gathered advice and input. The study was completed and provided to the Board in 2012.

Planned Actions 2013-14

A new plan for fund development and partnerships will be created and implemented. The early stages of engagement have begun. A new electronic grants and contact management system will be utilized for monitoring fund development and partnerships.

OBJECTIVE: Implement expanded fund development role, per consultations

Achievements in 2012-13

Key outcomes of the feasibility study suggested that although knowledge and understanding of SHRF in the donor community were low, the areas of Aboriginal Peoples' health research and rural and remote health research, offered opportunities for donor investment.

Planned Actions 2013-14

Processes and policies for donations and partnerships will be reviewed, enhanced, and approved to help SHRF leverage all opportunities for increasing the research funding pool.

OBJECTIVE: Ensure appropriate monies are in place through core funding sources

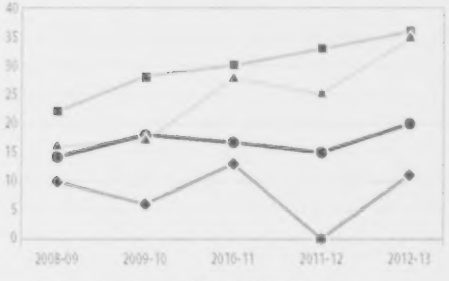
Achievements in 2012-13

SHRF received a three percent budget increase in the fiscal year. This amount was helpful for sustaining core programs and operations; however, applications continued to increase, which lead to a decrease in the success rate and many very good applications not being funded (see Graphs 2 and 3).

Planned Actions 2013-14

Over the next few years as the province continues to attract and retain health system clinician-researchers, demand for establishment program support is expected to increase. SHRF will consult with government and other stakeholders about innovative ways to address and support this growth.

GRAPH 2: NUMBER OF APPLICATIONS BY PROGRAM AND YEAR*



GRAPH 3: SUCCESS RATES BY PROGRAM AND YEAR**

*There was no competition in 2011-12.
**Success is calculated by the number of funded applications divided by the number of applications received.

OBJECTIVE: Growth in federal funding attained by Saskatchewan's health researchers

Achievements in 2012-13

The Sask-CIHR Regional Partnership Program (RPP) has a $2 million per year envelope provided by CIHR and provincial funds. Provincial funding consists of $700,000 per year from SHRF plus $250,000 from Saskatchewan's Innovation and Science Fund (ISF) (Ministry of Advanced Education) and $50,000 from the Universities of Saskatchewan and Regina. These monies support Saskatchewan's increased participation in federal health research programs. SHRF manages these funds with its university and government partners through a provincial advisory committee.

SHRF has been invited to participate in other CIHR partnership programs and does so as resources permit and opportunities are presented.

See Table 1 for a list of Partnership Program Grants and Awards, 2012-13.

Planned Actions 2013-14

SHRF expects to partner with CIHR on its recently launched Canadian Consortium on Neurodegeneration in Aging (CCNA) funding opportunity. The CCNA is the Canadian component of CIHR's International Collaborative Research Strategy for Alzheimer's Disease and will be the premier research hub for all aspects of research involving neurodegenerative diseases that affect cognition in aging.

Pathways to Equity (Aboriginal Health) is an additional federal initiative in which SHRF has indicated an interest. Since no CIHR program has been detailed yet, we will continue to monitor this development.

The 2013-14 grant year is the last year that CIHR will offer the Regional Partnership Program.

After that, SHRF will direct its federal matching funds to other strategic partnership opportunities with CIHR or other federal agencies.

Priorities for federal partnerships included Aboriginal Peoples' health, neurodegenerative diseases, and capacity-building.

SASK-RPP OPERATING GRANTS

Deborah Anderson
Cancer Research Unit, Medicine, U of S
Regulation of PTEN

Mohan Babu
Chemistry and Biochemistry, Science, U of R
Investigating the yeast mitochondrial interactome for disease-gene discovery

Oleg Dmitriev
Biochemistry, Medicine, U of S
Molecular mechanism of the human copper transporting ATPases

Nancy Gyurcsik
Kinesiology, U of S
Managing arthritis using physical activity: Identifying disease- and activity-specific psychosocial beliefs to improve adherence

Lisa Lix
Public Health, U of S
The analysis of patient-reported outcome measures: Statistical methods for response shift (PROM-RS)

Daniel MacPhee
Veterinary Biomedical Sciences, Veterinary Medicine, U of S
The role of integrin-linked kinase in human trophoblast cell differentiation and function

Louise Racine
Nursing, U of S
Understanding internationally educated nurses' professional, cultural, and social integration in Canadian nursing workplaces: Designing culturally competent and evidence-based retention programs

Scot Stone
Biochemistry, Medicine, U of S
The role of DGAT2 in triacylglycerol synthesis and lipid droplet formation

Sylvia Van den Hurk
Vaccine and Infectious Disease Organization, U of S
Characterization of dendritic cells in hepatitis C patients and applications to dendritic cell-based therapy

SASK-RPP NEW INVESTIGATOR SALARY AWARDS

Scot Leary
Biochemistry, Medicine, U of S
Genetic and functional characterization of SCO-dependent, mitochondrial regulation of cellular copper homeostasis

PARTNERSHIPS FOR HEALTH SYSTEM IMPROVEMENT PROGRAM

Shanthi Johnson
Kinesiology and Health Studies, U of R
Improving functional capacity and reducing falls among frail older adults: Delivery of exercise intervention through home care network

Achievements in 2012-13

TABLE 1: PARTNERSHIP PROGRAM GRANTS AND AWARDS 2012-13

Partnership Program			Awarded*	
	No.	Term	SHRF	Partner
Saskatchewan Research Chairs	1	5 yrs	$ 500,000	$ 500,000
Sask-CIHR Regional Partnership Program				
Operating Grants	9	2 yrs	$ 925,251	$ 925,251
New Investigator Salary Awards	1	5 yrs	$ 150,000	$ 150,000
Partnerships for Health System Improvement (with CIHR)	1	3 yrs	$ 68,252	$ 282,008
TOTAL	10		$ 1,643,503	$ 1,857,259

* Awarded amounts are for the full term of the grant.

Planned Actions 2013-14

OBJECTIVE: Ensure an efficient process for grant review and management

Achievements in 2012-13

For the first time SHRF sent out an online survey to applicants and administrators of Establishment and Fellowship applications about its application processes. The feedback will be used to improve SHRF processes where needed.

SHRF received strong support and confidence for how it manages its application processes from respondents in the survey in all four areas of: awards guide; application forms; communications with SHRF; and overall application experience.

SHRF is developing a comprehensive online research application and review system that will include online application preparation and submission, review, and reporting.

A new version of the Canadian Common CV (CCV) was implemented. This web-based system aims to reduce the workload for the research community by allowing researchers to maintain their CV data in a single repository and use it to apply to over 30 different funding organizations across Canada. SHRF is one of those funders and all applicants to our funding programs are required to prepare a CCV. SHRF uses the information in the peer review process. The CCV also populates the Directory of Researchers - an online source of research expertise in Saskatchewan and Canada.

SHRF consulted with research community leaders at its third round of annual Research Funding Advisory Forums, held in Saskatoon and Regina. The Forums facilitate a stronger connection to the health research community and provide an opportunity to meet with the associate deans of research in health areas and other senior research administrators to exchange updates, questions, and feedback. A total of 19 people attended this year's Forums.

Planned Actions 2013-14

The online research management system will be initiated for the intake of the Health Research Group Grants and Spinal Cord Injury Research Grant Competitions in the fall of 2013.

SHRF plans to continue with its Research Funding Advisory Forums in 2013-14.

OBJECTIVE: Support the research community in building human capacity

Achievements in 2012-13

SHRF invests in the formation, development, and ongoing support of high-quality research groups. The Health Research Group program supports groups of researchers who comprise an appropriate range of talent, experience, and perspectives for tackling complex health issues of importance to Saskatchewan. There are three phases:

- Phase One: formation and early development
- Phase Two: operating funding to support group's growth and productivity.
- Phase Three: sustain groups that continue to demonstrate productivity and excellence.

Planned Actions 2013-14

HEALTH RESEARCH GROUP GRANTS

PHASE I

Assessing and Mitigating Risks of Infectious Diseases
Emily Jenkins
Veterinary Microbiology, Veterinary Medicine, U of S

Surgical Oncology Continuous Quality Improvement Research Group
Gary Teare
Community Health and Epidemiology, Medicine, U of S
Gary Groot
Surgery, Medicine, U of S

PHASE II

Drug Discovery and Development Research Group
Jane Alcorn
Pharmacy and Nutrition, U of S

Safe Water for Health Research Team
Lalita Bharadwaj
Public Health, U of S
Cheryl Waldner
Large Animal Clinical Sciences, Veterinary Medicine, U of S

PHASE III

Tissue Engineering Research Group
Daniel Chen
Mechanical Engineering, Engineering, U of S

Indigenous Peoples' Health Research Centre
Jo-Ann Episkenew
English, Arts, U of R

SHRF's Postdoctoral Research Fellowship Program offers a full-time training opportunity for high-quality candidates in health-related fields. Fellows are supervised by experienced, active researchers to further develop their research skills and equip themselves for a career in health research.

SHRF also partners with agencies to increase the amount of funding available and build capacity in specific research areas. In 2012-13, SHRF offered two opportunities: Terry Fox Postdoctoral Fellow with the Terry Fox Research Institute; and the Crohn's and Colitis Postdoctoral Fellow, with the Crohn's and Colitis Foundation of Canada.

POSTDOCTORAL RESEARCH FELLOWSHIPS

Kyle Brown
Supervised by Suresh Tikoo
Vaccine and Infectious Disease Organization, U of S
Targeted disabled infectious single cycle (DISC) Bovine Adenovirus (BAdV)-3 as vaccine delivery vector

Sarika Garg
Supervised by Darrell Mousseau,
Psychiatry, Medicine, U of S
Presenilin-1 : At the intersection between diabetes, depression and Alzheimer's disease?

Ayman Mohammad
Terry Fox Postdoctoral Research Fellow
Supervised by Azita Haddadi
Pharmacy and Nutrition, U of S
Polymeric nanoparticles for cancer therapy

Hyun-Mi Pyo
Supervised by Yan Zhou
Vaccine and Infectious Disease Organization, U of S
The role of the P13K/Akt pathway in regulating influenza virus replication and pathogenesis

Syed Qadri
Supervised by Lixin Liu
Pharmacology, Medicine, U of S
Modulation of neutrophil recruitment by the interplay between RAGE and P13K isoforms P13Ky and P13K8

Elizabeth Vanderlinde
Supervised by Peter Howard
Microbiology and Immunology, Medicine, U of S
Elucidation of secretin assembly mechanisms in gram-negative pathogens

RESEARCH FELLOWSHIP TOP-UP INCENTIVE AWARD

Daniel Fuller
Supervised by Cory Neudorf and Erin Strumpf
Community Health and Epidemiology, Medicine, U of S
Searching for approaches to measure the effect of population health interventions: Integrating natural experiments and casual modelling

Achievements in 2012-13

SHRF's Establishment Grants are awarded to university research faculty who are new or newly resident in Saskatchewan. The grant aims to help them establish independent health research programs within the province and achieve the research productivity necessary to obtain longer term and more substantial funding from other sources.

ESTABLISHMENT GRANTS

Mohan Babu
Chemistry and Biochemistry, Science, U of R
Charting networks of mitochondrial protein complexes in human neurodegenerative diseases

Jorden Cummings
Psychology, Arts and Science, U of S
Evaluating the use of exposure to alleviate distress in caregivers of child victims of interpersonal trauma

Joyce Davison
Nursing, U of S
Profiling prostate cancer patients' preferences to facilitate treatment decision making

Brian Eames
Anatomy and Cell Biology, Medicine, U of S
Temporal regulation of skeletal cell differentiation by proteoglycan-dependent growth factor signaling

Holly Graham-Marrs
Nursing, U of S
Restoring Indigenous miyo-mahcihoyân (physical, mental, emotional, and spiritual) well-being

Christopher Hergott
Respirology, Critical Care and Sleep Medicine, Medicine, U of S
Evaluation of telehealth for the assessment and follow-up of lung cancer patients from rural Saskatchewan

Daniel MacPhee
Veterinary Biomedical Sciences, Veterinary Medicine, U of S
Investigation of the role of integrin activators in the process of human placental development

Cory Neudorf
Community Health and Epidemiology, Medicine, U of S
Health inequality in Saskatchewan: Comparing small area aggregate data and individual linked data in urban and rural environments

Catherine Trask
Canadian Centre for Health and Safety in Agriculture, Medicine, U of S
Risk factors for back disorders in Saskatchewan farmers: Exposure assessment for epidemiological studies

Suraj Unniappan
Veterinary Biomedical Sciences, Veterinary Medicine, U of S
Hormonal control of metabolism and body weight

Sonia Vanderby
Mechanical Engineering, Engineering, U of S
Analyzing temporal and geographical variations in computed tomography (CT) supply, demand and utilization in Saskatchewan to identify opportunities to improve efficiency and access

Planned Actions 2013-14

The Saskatchewan Research Chairs Program is intended to attract, support, and retain top-quality research leaders who are working in a provincial priority area and who contribute to capacity building and knowledge sharing in those areas.

The Saskatchewan Research Chair in Clinical Stroke Research was awarded to Saskatoon neurosurgeon and medical researcher Dr. Michael Kelly, College of Medicine, U of S. SHRF partnered with the Heart and Stroke Foundation of Canada and the U of S to create and fill this Chair that will advance understanding of strokes and improve prevention and treatment. SHRF has committed $100,000 per year for five years.

SASKATCHEWAN RESEARCH CHAIRS

Michael Kelly
Saskatchewan Research Chair in Clinical Stroke Research
Surgery, College of Medicine, U of S

The Saskatchewan Research Chair is MS Clinical Research may be awarded in 2013-14 in partnership with Saskatoon City Hospital Foundation; this would be a $1M investment over five years, shared 50:50 with our partner.

TABLE 2: SHRF APPLICATIONS RECEIVED, RECOMMENDED, AND AWARDED 2012-13

SHRF Program	Received		Recommended		Awarded*		
	No.	$	No.	$	No.	Term	$
Postdoctoral Research Fellowships	35	3,500,000	23	2,300,000	6	2 yrs	600,000
Establishment Grants	36	4,004,159	21	2,333,108	11	3 yrs	1,268,044
Research Connections Grants	20	79,712	17	72,650	17	n/a	72,650
Health Research Groups							
Phase I	4	120,000	3	90,000	2	2 yrs	60,000
Phase II	3	899,140	2	599,140	2	3 yrs	599,140
Phase III	4	2,998,304	4	2,998,304	2	3 yrs	1,500,000
Spinal Cord Injury Research Grants**	0	0	0	0	0	0 yrs	0
Total	102	11,601,315	70	8,393,202	40	13 yrs	4,099,834

*Awarded amounts are for the full term of the grant (see also Grant Selection Process section).
**No competition held in 2012-13.

OBJECTIVE: Support the research community in building infrastructure capacity

Achievements in 2012-13

The group working on Saskatchewan's submission to CIHR's Strategy for Patient-Oriented Research (SPOR) made good progress on developing a business plan for our province's Support Unit for People and Patient-Oriented Research and Trials (SUPPORT). The group, facilitated by SHRF, includes members from agencies that will be involved in establishing and running this multi-site research platform. The plan includes three key components: clinical intelligence to support decisions and track patient outcomes; real world clinical trials that offer leading-edge patient care; and methods training and consultation for patient-oriented research. It builds on existing strengths and will add critical capacity and expertise in Saskatchewan. CIHR's program offers funding over five years that is to be matched by provincial investments.

Planned Actions 2013-14

The SHRF led group plans to work on sourcing the required provincial support from various stakeholders with implementation targeted for 2014.

3 ENCOURAGING THE SHARING AND USE OF HEALTH RESEARCH

SHRF USES ITS ASSETS AND RESOURCES TO ENCOURAGE THE SHARING AND USE OF HEALTH RESEARCH TO CREATE HEALTH AND SOCIAL BENEFITS.

OBJECTIVE: Provide opportunities for researchers and users of research to engage in knowledge translation

Achievements in 2012-13

SHRF's Research Connections Grant program supports researchers in connecting with others to share and apply research knowledge through events such as, research days, conferences, public events, and major meetings.

RESEARCH CONNECTIONS GRANTS

Jenny Basran
Clinical Gerontology, Medicine, U of S
Ambulatory Activity of Older Adults in Acute Care

Joanne Bracken
Alzheimer Society of Saskatchewan,
Spotlight on Research: Alzheimer's Disease and Related Dementias

Carolyn Brooks
Sociology, Arts and Science, U of S
Innovations in Qualitative Research 2012

Dean Chapman
Anatomy and Cell Biology, Medicine, U of S
Biomedical Beamline Future Directions Forum

Donna Goodridge
Nursing, U of S
Developing Synergies in Complex Continuing Care

Jade Gulash
Health Quality Council
Inspire: Health Care Quality Summit

John Howland
Physiology, Medicine, U of S
Saskatchewan Neuroscience Network Research Day/ Altschul Mini-Symposium

John Howland
Physiology, Medicine, U of S
Brain Awareness Week Public Lecture: Childhood Brain Development and Health Disparities in Saskatoon

Lynn Jansen
Nursing, U of S
Translating Knowledge Through Relating: Social Interaction Knowledge Translation for In-home Care

Edward Krol
Pharmacy and Nutrition, U of S
3rd Western Canadian Medicinal Chemistry Workshop

Anne Leis
Community Health and Epidemiology, Medicine, U of S
The Saskatchewan cancer research day: From molecular biology to the human experience of cancer

Greg Marchildon
Johnson-Shoyama Graduate School of Public Policy, U of R
Bending the Cost Curve in Health Care Conference

Nazeem Muhajarine
Community Health and Epidemiology, Medicine, U of S
Creating Active Communities: The Built Environment and Children's Health

Bruce Reeder
Community Health and Epidemiology, Medicine, U of S
Interprovincial Symposium on Health Projects with Ukraine

Heather Wilson
Vaccine and Infectious Disease Organization U of S
Prairie Infectious Immunology Network Summer Meeting

Brandy Winquist
Cypress Regional Health Authority
Symposium: "The growing burden of non-communicable disease: Using surveillance to reduce deaths and improve lives."

June Zimmer
Research and Health Information Services, Regina Qu'Appelle Health Region
Research Showcase 2012. Research Matters: Putting Research into Action

SHRF facilitated the proclamation by the Government of Saskatchewan of "Health Research Week" in 2012. During the week of December 2-8, a number of agencies including SHRF, publicized contributions made by health researchers in Saskatchewan and raised awareness of the province's health research enterprise.

Planned Actions 2013-14

Increase the impact of Health Research Week by acting as a hub for all activity considered for promotion during the week.

OBJECTIVE: Communicate SHRF publications and materials to constituents

Achievements in 2012-13

Based on usability testing, areas of the website were improved in 2012-13, including the search function and the accessibility of key documents for the board and for applicants. SHRF continues to maintain an up-to-date site responsive to the needs of the health research community and the general public.

A number of high-quality communication vehicles were produced aimed at informing and educating constituents about health research activity and successes:

- a video "Saskatchewan Health Research: An Investment in Discovery" was produced to highlight some of the success stories in health research;
- "SHRF at a Glance" brochure provides an overview of the organization and its mandate;
- a 10th anniversary booklet titled "Ten Years of Innovation and Excellence: 2003-2013" was also prepared to celebrate health research impact and success in Saskatchewan; and
- a number of reports related to health research capacity and impact are highlighted in Strategic Goal #4.

All items are available on our website for viewing and/or review.

Planned Actions 2013-14

SHRF will continue to maintain a site that provides timely and accurate information for the research community and general public.

As part of its own knowledge translation and communication efforts raising awareness of its 10th anniversary, SHRF will be undertaking a provincial tour in 2013 in partnership with Chambers of Commerce and service clubs in a number of communities around the province.

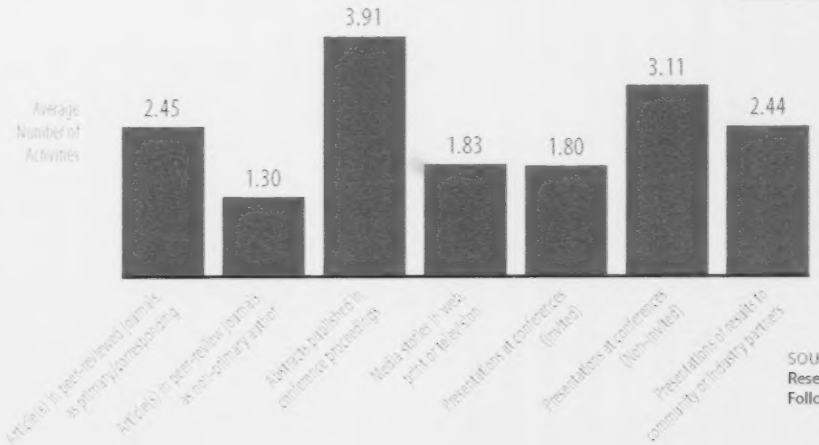
OBJECTIVE: Increase number of knowledge translation activities by SHRF-funded researchers

Achievements in 2012-13

SHRF encourages researchers and their institutions to report on research and outcomes. SHRF collaborates with the Universities on news releases and other activities aimed at increasing knowledge translation.

In addition, through its five-year follow up study, SHRF tracks the activities of its funded researchers. Graph 4 captures the impact of the knowledge translation activities of the current 2007-08 cohort group (see Graph 4).

GRAPH 4: KNOWLEDGE TRANSLATION ACTIVITIES FIVE YEAR FOLLOW-UP 2007-08 COHORT



SOURCE: Saskatchewan Health Research Foundation Five-year Follow-up Study (2012)

Planned Actions 2013-14

The 10-year term of the provincial Health Research Strategy will end in March 2014. As the lead agency on the Strategy, SHRF will be undertaking consultations to update the strategy including: a review of its directions or themes, priorities, and actions, and a consideration of new developments and emerging needs.

OBJECTIVE: Increase public awareness of health research in SK

Achievements in 2012-13

Nearly 150 people attended the Santé! Awards Evening, SHRF's annual celebration of health research successes and excellence in Saskatchewan in 2012. At the event, the Achievement Award winner and Top Researcher Awards were announced.

SHRF announced Dr. Adam Baxter-Jones as the Achievement Award winner for 2012. Dr. Baxter-Jones has made major contributions to health and health research in our province and continues to contribute as a researcher, teacher and leader. He has been instrumental in pushing to the forefront the importance of treating osteoporosis during the growth years – novel work that has informed public policy and clinical guidelines for preventing bone disease. Dr. Baxter-Jones' leadership in bone and joint imaging, including synchrotron imaging, has contributed significant knowledge to the treatment and management of bone and joint diseases such as osteoporosis and arthritis.

Top Researcher Awards were given to the top two researchers in each of the Establishment Grant and Postdoctoral Research Fellowship grant award competitions based upon submitted applications that have been peer reviewed and scored.

The top two award winners in the Establishment Grant program were:

- Dr. Suraj Unniappan from Veterinary Biomedical Sciences at the U of S in biomedical research. Dr. Unniappan is investigating the hormonal basis of obesity and diabetes by characterizing novel proteins that are potential therapeutic targets; and
- Dr. Catherine Trask at the Canadian Centre for Health and Safety in Agriculture at the U of S in socio-health research. Dr. Trask is studying the occupational determinants of health as they relate to lower back disorders in farmers.

The top two award winners in the Postdoctoral Fellowship program were:

- Dr. Syed Qadri from the College of Medicine at the U of S in biomedical research, working with supervisor Dr. Lixin Liu in the Department of Pharmacology. Dr. Qadri's research is finding how to reduce the morbidity and mortality of diabetic patients by reducing the inflammatory and infectious complications of the disease; and
- Dr. Daniel Fuller from Community Health and Epidemiology in the College of Medicine at the U of S in socio-health research, with supervisors Dr. Cory Neudorf and Dr. Erin Strumpf. Dr. Fuller is exploring new research methods for population programming to ensure they are beneficial to population health.

SHRF, as demonstrated through its publications, public tour, Health Research Week coordination, and 10th anniversary activities works continuously to increase awareness of health research in Saskatchewan.

Planned Actions 2013-14

The Santé! Awards Evening will be the culmination of SHRF's 10th anniversary year. In addition to announcing the Achievement Award and Top Researcher Awards, special announcements will be made to enhance the celebration.

SHRF conducts a public opinion survey every two years. The next survey is scheduled for 2013-14.

4 ACHIEVING EXCELLENCE

SHRF USES ITS ASSETS AND RESOURCES TO ENSURE THAT THE ACTIONS IDENTIFIED IN THIS STRATEGIC PLAN ARE IMPLEMENTED AND EVALUATED

OBJECTIVE: Improve efficiencies and methodology of health research outcomes and impact data

Achievements in 2012-13

SHRF completed a new study titled "Measuring the Value of Saskatchewan's Health Research." This study was the culmination of several years' work that began with SHRF working with other health research funding agencies and the Canadian Academy of Health Sciences (CAHS) to design a method to assess the impact and value of research and its wide-ranging outcomes and benefits. As a member of the National Alliance of Provincial Health Research Organizations (NAPHRO) and a contributor to this foundational work, SHRF demonstrated leadership in the development of indicators that capture the impact of health research and health research funding.

The report is available on SHRF's website.

SHRF expanded the use of current researcher data to produce "Health Research Capacity in Saskatchewan: A descriptive report - 2nd Edition." This edition describes who Saskatchewan health researchers are and what types of health research are being done in Saskatchewan in a manner which updates the previous report. The data was drawn from the Saskatchewan Directory of Health Researchers, a web-based searchable database containing Canadian Common Curriculum Vitae (CCV) entries. This report is a snapshot in time, providing details on demographics, training, research focus, and funding.

The report is available on SHRF's website.

Planned Actions 2013-14

Report to be released and shared with stakeholders early in the fiscal year.

Working with our NAPHRO partners, finalize and release a report that utilizes common econometric data for all jurisdictions in Canada.

Encourage all active researchers in Saskatchewan to enter and maintain their information in the Directory of Researchers when asked to do so as part of their grant application process.

OBJECTIVE: Increase outreach to all stakeholders

Achievements in 2012-13

SHRF maintains ongoing dialogue with the provincial government and participates with key health research related ministries on a regular basis.

To facilitate the communication and reporting of SHRF-funded research and our programs, SHRF writes summaries of all research being funded and profiles of all researchers and research groups. These summaries and supporting photography are made available on the SHRF website, to universities, researchers and their home institutions, and to the media.

Planned Actions 2013-14

SHRF will continue to work with all levels of government to ensure direct dialogue and input is exchanged to foster a healthy environment for Saskatchewan's health research enterprise.

OBJECTIVE: **Success in attaining SHRF's strategic goals**

Achievements in 2012-13	Planned Actions 2013-14
SHRF uses a Balanced Scorecard as a strategic management and performance management tool. In each of five areas success is indicated by a colour: green for meeting and exceeding the objective; yellow for being just off target; and red for underachievement. In 2012-13, the summary total for the full scorecard was as follows: green 57%; yellow 26%; and red 15% (primarily in the financial resources areas).	

OBJECTIVE: **Excellence in all aspects of SHRF's operations and governance**

Achievements in 2012-13	Planned Actions 2013-14
To ensure effective and efficient practices in research funding policy and procedures, SHRF sent out an online survey to applicants and administrators following the March 15th application deadline for the Establishment Grant Program and the Postdoctoral Fellowship Program. The feedback will be used to help as part of our continuous improvement efforts aimed at streamlining our guidelines, application and intake processes.	
A SHRF Organizational Climate Survey (i.e. corporate, personal, leadership, team, communication, physical, human resources, and work) is used to assess and continuously improve the quality of our working environment. This year's mean of 6.03 improved on the previous year. (Scale used: 1-low; 7-high).	Conduct annual survey and maintain a supportive working environment.
For SHRF's last annual audit of the fiscal year 2011-12, the Provincial Auditor provided an "unqualified report", which means 100% compliance with the regulations governing the organization.	Maintain 100% compliance with the regulations governing SHRF.

Year in Review

Health research creates intellectual capacity, builds institutional excellence, and has a wide-ranging and long-term impact on the health of people and communities. SHRF's achievements in 2012-13 demonstrate these outcomes. SHRF's activities for the year and those planned for the next fiscal year, aim to continue building upon Saskatchewan's successes and strengths, while ensuring its mandate is achieved and the organization remains transparent and accountable to the people of Saskatchewan.

FINANCIAL STATEMENTS

FOR THE YEAR ENDING MARCH 31, 2013

Report of Management

Management is responsible for the integrity of the financial information reported by the Saskatchewan Health Research Foundation.

Fulfilling this responsibility requires the preparation and presentation of financial statements and other financial information in accordance with Canadian generally accepted accounting principles that are consistently applied, with any exceptions specifically described in the financial statements.

The accounting system used by the Foundation includes an appropriate system of internal controls to provide reasonable assurance that:

- transactions are authorized;
- the assets of the Foundation are protected from loss and unauthorized use; and
- the accounts are properly kept and financial reports are properly monitored to ensure reliable information is provided for preparation of financial statements and other financial information.

To ensure management meets its responsibilities for financial reporting and internal control, board members of the Foundation discuss audit and financial reporting matters with representatives of management at regular meetings. Foundation board members have also reviewed and approved the financial statements with representatives of management.

The Provincial Auditor of Saskatchewan had audited the Foundation's statement of financial position, statements of operations, change in net financial assets and cash flow. Her responsibility is to express an opinion on the fairness of management's financial statements. The Auditor's report outlines the scope of her audit and her opinion.

Terry Baker
Board Chair

June M. Bold, MSc
Chief Executive Officer

PROVINCIAL AUDITOR
of Saskatchewan

INDEPENDENT AUDITOR'S REPORT

To: The Members of the Legislative Assembly of Saskatchewan

I have audited the accompanying financial statements of Saskatchewan Health Research Foundation, which comprise the statement of financial position as at March 31, 2013, and the statement of operations, change in net financial assets and cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian public sector accounting standards for Treasury Board's approval, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

My responsibility is to express an opinion on these financial statements based on my audit. I conducted my audit in accordance with Canadian generally accepted auditing standards. Those standards require that I comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my audit opinion.

Opinion

In my opinion, the financial statements present fairly, in all material respects, the financial position of Saskatchewan Health Research Foundation as at March 31, 2013, and the results of its operations, changes in its net financial assets, and its cash flows for the year then ended in accordance with Canadian public sector accounting standards.

Regina, Saskatchewan
July 4, 2013

Bonnie Lysyk, MBA, CA
Provincial Auditor

1500 Chateau Tower - 1920 Broad Street Regina, Saskatchewan S4P 3V2
t 306.787.6398 *f* 306.787.6383 *e* info@auditor.sk.ca
www.auditor.sk.ca

STATEMENT OF FINANCIAL POSITION

As at March 31

	2013	2012 (Note 12)
Financial assets		
Cash and cash equivalents (Schedule 2)	$ 96,688	$ 5,305,470
Accrued interest receivable	67,716	61,111
Accounts receivable	200,937	73,904
Short-term investments (Schedule 2)	2,116,000	4,166,151
Long-term investments (Schedule 2)	3,460,061	1,594,859
	5,941,402	11,201,495
Liabilities		
Accounts payable and accrued liabilities	35,741	82,626
Payroll liabilities	16,286	17,943
Grants payable	4,847,862	5,185,454
	4,899,889	5,286,023
Net financial assets	1,041,513	5,915,472
Non-financial assets		
Tangible capital assets (Note 3)	29,795	47,234
Prepaid expenses	15,613	9,102
	45,408	56,336
Accumulated surplus	$ 1,086,921	$ 5,971,808

Commitments (Schedule 3, Notes 2(d), and 5)

(See accompanying notes to the financial statements)

STATEMENT OF OPERATIONS
For the year Ended March 31

	2013		2012
	Budget	Actual	Actual
	(Note 10)		(Note 12)
Revenues			
Government Contributions			
Ministry of Health (Note 13)	$ 5,584,000	$ 5,783,999	$ 10,810,135
Ministry of Advanced Education	400,000	400,000	649,144
Non-Government Contributions			
Alzheimer's Society of Saskatchewan	100,000	100,000	100,000
Heart and Stroke Foundation of Canada	100,000	100,000	-
Health Quality Council	60,000	60,000	-
Terry Fox Research Institute	50,000	25,000	-
Donations and Sponsorships	7,000	4,700	3,500
Other Revenue (Note 7)	218,627	317,533	419,965
Total Revenues	6,519,627	6,791,232	11,982,744
Expenses			
Research funding			
Saskatchewan Health Research Foundation programs	3,833,477	3,816,362	4,426,204
Partnership programs (Note 6)	1,522,917	1,408,573	1,136,026
Program support	234,379	204,985	234,748
Dissemination and promotion	276,870	261,789	296,280
Impact & Evaluation	145,477	134,232	141,294
Leadership and management			
Board	49,448	30,580	40,702
Administrative	962,216	819,598	837,432
Total Expenses (Schedule 1)	7,024,784	6,676,119	7,112,686
Return of grant to Ministry of Health (Note 13)	-	(5,000,000)	-
Annual (deficit) surplus	**$ (505,157)**	**(4,884,887)**	**4,870,058**
Accumulated surplus, beginning of year		5,971,808	1,101,750
Accumulated surplus, end of year		**$ 1,086,921**	**$5,971,808**

(See accompanying notes to the financial statements)

STATEMENT OF CHANGE IN NET FINANCIAL ASSETS

For the Year Ended March 31

	2013	2012
		(Note 12)
Annual (deficit) surplus	$ (4,884,887)	$ 4,870,058
Acquisition of tangible capital assets	(2,609)	(24,873)
Disposal of capital assets	-	533
Amortization of tangible capital assets	20,048	27,059
	17,439	2,719
Use of inventory	-	3,211
Acquisition of prepaid expense	(87,744)	(65,162)
Use of prepaid expense	81,233	78,415
	(6,511)	16,464
(Decrease) increase in net financial assets	(4,873,959)	4,889,241
Net financial assets, beginning of year	5,915,472	1,026,231
Net financial assets, end of year	$ 1,041,513	$ 5,915,472

(See accompanying notes to the financial statements)

STATEMENT OF CASH FLOWS
For the Year Ended March 31

	2013	2012 (Note 12)
Operating transactions		
Annual (deficit) surplus	$ (4,884,887)	$ 4,870,058
Non-cash items included in annual surplus:		
Amortization of tangible capital assets	20,048	27,059
Loss on Disposal of capital assets	-	-
Bond amortization	(6,120)	(29,939)
Net change in non-cash working capital items:		
Accrued interest receivable	(6,605)	68,984
Accounts receivable	(127,033)	6,736
Inventory	-	3,211
Prepaid expenses	(6,511)	13,253
Deferred revenue	-	(5,408,279)
Accounts payable and accrued liabilities	(46,885)	39,860
Payroll liabilities	(1,657)	(4,610)
Grants payable	(337,592)	(87,445)
Cash provided for operating transactions	(5,397,242)	(501,112)
Capital transactions		
Cash used to acquire tangible capital assets	(2,609)	(24,339)
Cash applied to capital transactions	(2,609)	(24,339)
Investing transactions		
Purchase of investments	(5,078,437)	(1,300,000)
Proceeds from disposal and redemption of investments	5,269,506	7,045,917
Cash provided by investing transactions	191,069	5,745,917
(Decrease) increase in cash and cash equivalents	(5,208,782)	5,220,466
Cash and cash equivalents, beginning of year	5,305,470	85,004
Cash and cash equivalents, end of year	$ 96,688	$ 5,305,470

(See accompanying notes to the financial statements)

NOTES TO THE FINANCIAL STATEMENTS

MARCH 31, 2013

1. Establishment of the Foundation

On January 31, 2003, *The Saskatchewan Health Research Foundation Act* (S.S. 2002, c.S-21.1) came into force establishing the Saskatchewan Health Research Foundation (Foundation). The Foundation is responsible for organizing, managing and allocating most provincial health research funding in Saskatchewan and for ensuring that supported research fits with the Province's health research priorities and leads to benefits for health and the health system in Saskatchewan. The Foundation is the lead agency on implementing the provincial Health Research Strategy.

2. Accounting Policies

Pursuant to standards established by the Public Sector Accounting Board (PSAB), the Foundation is classified as an "other government organization." The Foundation uses generally accepted accounting principles applicable to government. The following accounting principles are considered to be significant.

a) Revenue

The Foundation's main revenue for operations is contributions from the Ministry of Health – General Revenue Fund with other revenue coming from partnerships, interest, recoveries and miscellaneous revenue.

Contributions from the Ministry of Advanced Education are used for federal partnership opportunities such as the Canadian Institutes of Health Research (CIHR) Regional Partnership Program (RPP) and the CIHR Partnerships for Health System Improvement Program (PHSI) (see note 6).

Funds not spent during the term of a research grant or award compose recoveries if the expense was recognized in the prior years.

Government contributions are recognized as revenue when the transfer is authorized and any eligibility criteria are met, except to the extent that contribution stipulations give rise to an obligation that meets the definition of a liability. Contributions are recognized as deferred revenue when contribution stipulations give rise to a liability. Contributions are recognized in the statement of operations as the stipulation liabilities are settled.

b) Measurement uncertainty

The preparation of financial statements in accordance with PSAB accounting principles requires the Foundation's management to make estimates and assumptions that affect the reported amounts of assets and liabilities and the disclosure of commitments at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

c) Tangible capital assets

The recognition and measurement of tangible capital assets is based on their service potential. Purchases of furniture and office equipment over $250 and computer hardware and software over $500 are recorded at cost as a capital asset. Purchases below these amounts are expensed as incurred. Amortization is recorded on a straight-line basis as follows:

Furniture	10 years
Office Equipment	5 years
Computer Hardware and Software	3 years
Leasehold Improvements	length of lease

Normal maintenance and repairs are expensed as incurred.

d) Research grants and awards expense

Grants and awards expense is recorded when eligibility has been determined and the grant and or award has been authorized. Awarded funds are sent to the recipients' home institution to manage and disburse. Funds not spent during the term of a research grant or award reduce the respective expense if the expense was recognized in the same year.

Internally administered awards:
The Foundation holds annual funding competitions through which applications are adjudicated by experts based on excellence and relevance. Terms vary and are often multi-year. For internally administered multi-year grants and awards, the Foundation assesses eligibility and provides authorization on a yearly basis (see Schedule 3, Schedule of Future Research Funding Commitments).

Externally administered awards:
For some partnership programs, the Foundation's partner administers the grants and awards. For example, CIHR currently administers RPP and PHSI grants and awards. For externally administered multi-year grants and awards, the Foundation records the full amount of the expense in the year that authorization for funding is received from CIHR.

e) Investments

Investments are valued at amortized cost.

f) Basis of accounting

The financial statements are prepared using the accrual basis of accounting.

3. Tangible Capital Assets

	Furniture and Equipment	Leasehold Improvements	2013 Totals	2012 Totals
Opening cost	$ 140,490	$ 48,848	$ 189,338	$ 168,111
Additions during the year	2,609	-	2,609	24,873
Disposals during the year	(11,386)	-	(11,386)	(3,646)
Closing cost	131,713	48,848	180,561	189,338
Opening accumulated amortization	93,256	48,848	142,104	118,158
Amortization for the year	20,048	-	20,048	27,059
Disposals during the year	(11,386)	-	(11,386)	(3,113)
Closing accumulated amortization	101,918	48,848	150,766	142,104
Net book value of tangible capital assets	$ 29,795	$ -	$ 29,795	$ 47,234

4. Designated Assets

The Foundation is holding $138,000 as designated assets to be disbursed on the Quality Improvement Chair in future years.

5. Lease Commitments

At March 31, 2013, the Foundation had the following lease commitments:

	2014	2015	2016	2017	2018
Office Lease*	$ 160,691	$ 160,691	$ 169,377	$ 178,063	$ 89,032
Postage meter lease	165	-	-	-	-
	$ 160,856	$ 160,691	$ 169,377	$ 178,063	$ 89,032

*The office lease has been renewed for 5 years during 2012-13.

6. Partnerships

The Foundation periodically enters into funding partnerships, often spanning more than one year, to help achieve its goals and objectives. In 2012-13 the Foundation provided research funding through the following partnerships:

a) Saskatchewan –CIHR Regional Partnership Program (RPP)

In a partnership that started in 1999 and has been extended to 2013-14, the Foundation matches funding from the CIHR-RPP on a 1:1 basis to support Saskatchewan researchers and research projects. In 2012-13, the Foundation also used funds from the Ministry of Advanced Education's contributions designated for federal matching opportunities.

b) CIHR Partnerships for Health System Improvement Program (PHSI)

Since 2005-06, the Foundation and CIHR have been in partnership to support teams of researchers and decision makers interested in conducting applied and policy-relevant health research useful to health system managers and/or policy makers and strengthening the Canadian health care system. Funding is matched on a 1:4 basis by the Foundation and CIHR respectively.

c) Saskatchewan Research Chairs

Since 2009-10, the Foundation has been funding a five-year Saskatchewan Research Chair in Alzheimer Disease and Related Dementia, in 1:1 funding partnership with the Alzheimer Society of Saskatchewan. The Foundation receives the partner's contribution on a quarterly basis, expenses the chair awards on an annual basis, and sends the partner and Foundation funds together to the award holder's home institution. A new five-year Saskatchewan Research Chair for Clinical Stroke Research was awarded in 2012-13 in equal partnership with Heart and Stroke Foundation. The Foundation has another research chair partnership where the award has not yet been made. Partner funds flow to the Foundation when there is a successful candidate in place.

7. Other Revenue

In 2012-13, other revenue generated by the Foundation included interest of $169,496, rental revenue of $33,092, recoveries of $96,809 and additional internally generated revenues of $18,136.

8. Related Party Transactions

Included in these financial statements are transactions with various Saskatchewan Crown Corporations, ministries, agencies, boards and commissions related to the Foundation by virtue of common control by the Government of Saskatchewan, and non-Crown corporations and enterprises subject to joint control or significant influence by the Government of Saskatchewan (collectively referred to as "related parties").

Routine operating transactions with related parties are recorded at the agreed upon rates charged by those organizations and are settled on normal trade terms. These transactions and amounts outstanding at year-end are as follows:

	2013	2012
Miscellaneous revenue:		
University of Regina	$ 19	$ 1,544
University of Saskatchewan	129,881	207,653
Health Quality Council	60,000	-
Canadian Light Source	1,500	1,000
Research grant, administrative and occupancy expenses:		
Capital Pension Plan - employee benefits	44,731	44,017
Regina Qu'Appelle Health Region	3,500	-
Saskatchewan Opportunities Corporation – Innovation Place	167,460	154,153
Saskatoon Health Region	-	155
SaskTel	9,247	12,367
University of Regina	673,003	778,457
University of Saskatchewan	4,545,302	4,795,289
Other	2,173	2,304
Accounts receivable	15,094	14,230
Investments	200,000	200,000
Accounts payable and accrued liabilities	13,068	534
Grants payable	4,847,862	5,185,454

The Foundation pays Provincial Sales Tax to the Ministry of Finance on all its taxable purchases. Taxes paid are recorded as part of the cost of those purchases.

Other transactions with related parties and amounts due to or from them are described separately in these financial statements and the notes thereto.

9. Financial Instruments

The Foundation has the following financial instruments: accrued interest receivable, accounts receivable, investments, accounts payable, and grants payable. The following paragraphs disclose the significant aspects of these financial instruments. The Foundation has policies and procedures in place to mitigate the associated risks.

a) Significant terms and conditions

There are no significant terms and conditions associated with the financial instruments, other than investments, that may affect the amount, timing, and certainty of future cash flows. Significant terms and conditions for investments are described separately in these financial statements and the accompanying notes.

b) Interest rate risk

The Foundation is exposed to interest rate risk when the value of its financial instruments fluctuates due to changes in market interest rates. As the Foundation seldom disposes of investments prior to maturity, this risk is minimal.

The Foundation's receivables and payables are non-interest bearing. Due to the short-term nature of these, as well as cash and short-term investments, interest rate risk is minimal.

As market interest rates fluctuate the market value of long-term investments moves in the opposite direction. This risk will affect the price the Foundation could sell the investments for prior to maturity.

c) Credit risk

The Foundation is exposed to credit risk from potential non-payment of accounts receivable or investment income and principal.

Most of the Foundation's receivables are from the provincial government; therefore the credit risk is minimal.

The Foundation's investments consist of provincial and federal government bonds, promissory notes, treasury bills and bankers acceptances with large Canadian banks. Therefore, credit risk for investments and related accrued interest receivable is minimal.

d) Fair value

For the following financial instruments, the carrying amounts approximate fair value due to their immediate or short-term nature:

Accrued interest receivable

Accounts receivable

Short-term investments

Accounts payable

Grants payable

The fair value of long-term investments is $3,460,061 (2011-12 $1,594,859). The fair value is considered to approximate quoted market values.

10. Budget

The operating budget was approved by the Foundation's Board on April 13, 2012.

11. Pension Plan

The Foundation is a participating employer in the Capital Pension Plan, a defined contribution pension plan. Eligible employees make monthly contributions of 6% of gross salary with the Foundation contributing 6.45% of gross salary. The Foundation's financial obligation is limited to making required contributions. During the year, the Foundation's total contributions were $44,731 (2011-12 $44,905).

12. Comparative Information

Certain prior year amounts have been reclassified to conform with the current year's presentation.

13. Return of grant to Ministry of Health

In current year, the Foundation returned $5M to Ministry of Health which was originally targeted for Multiple Sclerosis(MS) liberation clinical trials. These funds were recognized as revenue in 2011-12, in the course of adopting PSAB standard PS3410 – Government Transfers.

SCHEDULE OF EXPENSES BY OBJECT

For the year ended March 31

	2013		2012
	Budget	Actual	Actual
	(Note 10)		(Note 12)
Advertising and promotion	$ 64,450	$ 25,948	$ 19,765
Amortization	22,000	20,048	27,059
Board expenses	49,448	30,580	40,702
Employee benefits	144,835	137,729	143,488
Employee salaries	771,416	692,242	692,045
Grants and awards	5,356,394	5,224,936	5,562,230
Office expenses	75,101	58,310	72,280
Office space	180,000	153,534	134,868
Professional Fees	246,390	226,706	320,041
Publications	32,150	26,719	31,265
Review committee expenses	26,550	18,431	16,989
Travel and meetings	56,050	60,936	51,954
	$ 7,024,784	$ 6,676,119	$ 7,112,686

(See accompanying notes to the financial statements)

SCHEDULE OF INVESTMENTS

As at March 31, 2013

	MATURITY DATE	CARRYING VALUE	EFFECTIVE RATE
Cash and cash equivalents:			
Cash		$ 1,535	
TD Waterhouse - cash		95,147	
RBC Dominion - cash		6	
		96,688	
Short-term investments:			
TD Mortgage GIC	1-May-2013	400,000	1.650
TD Mortgage GIC	12-Jul-2013	616,000	1.450
Province of Manitoba Allocation	27-Sep-2013	200,000	
TD Mortgage Corp. GIC	8-Nov-2013	100,000	2.000
TD Pacific Mtge Corp. GIC	8-Nov-2013	100,000	2.000
AGF Trust GIC	8-Nov-2013	100,000	2.000
Royal Bank of Canada GIC	25-Jan-2014	600,000	1.550
		2,116,000	
Long-term investments:			
AGF Trust GIC	21-Apr-2014	100,000	2.210
Canadian Western Bank GIC	21-Apr-2014	100,000	2.200
Bank of Nova Scotia GIC	1-May-2014	400,000	1.900
Royal Bank of Canada GIC	14-Jul-2014	500,000	1.650
Bank of Nova Scotia GIC	24-Nov-2014	300,000	2.050
Manulife Bank GIC	1-May-2015	100,000	2.350
Royal Bank of Canada GIC	1-May-2015	200,000	2.150
Equitable Trust GIC	1-May-2014	100,000	2.350
Royal Bank GIC	13-Jul-2015	350,000	1.900
Bank of Nova Scotia GIC	9-Oct-2015	250,000	2.200
Canadian Tire Bank GIC	12-Jul-2016	100,000	2.350
Royal Bank of Canada GIC	12-Jul-2016	100,000	2.100
Toronto Dominion Bank-bond	2-Aug-2016	360,061	2.948
Bank of Nova Scotia GIC	9-Oct-2016	500,000	2.300
		3,460,061	
		$ 5,672,749	

(See accompanying notes to the financial statements)

SCHEDULE OF FUTURE RESEARCH FUNDING COMMITMENTS

As at March 31, 2013

The Future Research Funding commitments at March 31, 2013 were as follows Note 2(d):

YEAR	SASKATCHEWAN HEALTH RESEARCH FOUNDATION PROGRAMS
2014	$ 1,739,223
2015	1,225,980
2016	326,000
2017	326,000
	$ 3,617,203

(See accompanying notes to the financial statements)

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